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## APPLICANTS

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\*\* CONTINUING DATA *rough* \*\*\*\*\*\*\* FOREIGN APPLICATIONS *page* \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>ph</i>	STATE OR COUNTRY IL	SHEETS DRAWING 1	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 1
Verified and Acknowledged	Examiner's Signature	Initials			

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## TITLE

Nursing garment and support bra

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